IREDELL COUNTY HEALTH DEPARTMENT

(SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION
(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 12C)

11089

OWNER OR CONTRACTOR William Proffitt DATE 2-26-80 PERMIT NO. 145-5-A-2

PHONE: Business _____ Home _____

LOCATION 115 N Country Life 2nd Mtn Right

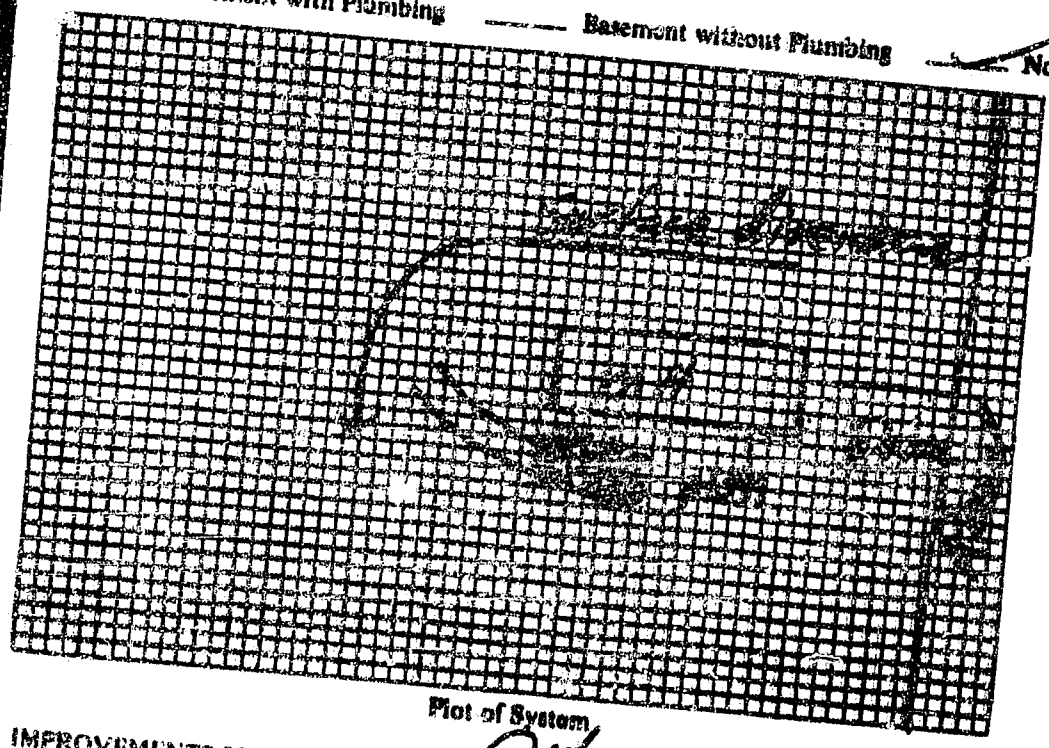
SUBDIVISION NAME Country Life Est LOT NO. 27 S. R. No. _____ SECTION OR BLOCK NO. _____

House ( ) Mobile Home ( ) Business ( ) Other _____

No. Bedrooms 2 No. Bathrooms 2½

Garbage Disposal Unit	Yes ( )	No (✓)	Character & Porosity of Soil PRC Suitable
Auto. Dishwasher	Yes ( )	No (✓)	Percolation Rate 37
Auto. Wash. Machine	Yes (✓)	No ( )	Topography Slight
Site Suitable	Yes (✓)	No ( )	Depth to Water Table 10'
Lot Area ½ Ac			Rock or other impervious formations None

_____ Basement with Plumbing _____ Basement without Plumbing ✓ No Basement



Plot of System

Size of Tank 1000 Gals.
Nitrification Field:
No. of Lines 2
Sq. Ft. 720 Linear Ft. 240
Depth of Stone in Lines 2'
Water Supply: Individual ( )
Public (✓)

Installed by Wayne Hyatt

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY Dickson

COMMENTS: Surface diversion is highly recommended

CERTIFICATE OF COMPLETION BY Dickson DATE 3/7/80

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold